

Application # _____ (For office use)

Columbus Art Commission

Certificate of Approval Application NEW WORKS OF	ART	
Project Name LIVINGSTON PARK TUBLIC ART	PROJECT - SCULPTURE #2 Date 6:	5.15
Exact Location of the Proposed Project		
Type of Art Work SULPTURE	(e.g. sculpture, mural, installation, video, etc.)	
Type of Action Requested (Check as many as apply) Conceptual review of project design and placement Design approval Design reconsideration Proposed Installation (Check as many as apply) Temporary - Please list length of duration (up to 5 years) Long-term - Duration greater than five years to indefinitely Installation of individual work(s) Integrated into the design and physical development of a buil On property owned or leased by the City of Columbus In, on or over the public right-of-way	O Placement approval O Alteration to CAC approved design and/or placement Placement reconsideration ARTIST APPROVAL	
Ownership Art will be owned by the City of Columbus Art will be donated to the City of Columbus Art will be loaned to the City of Columbus Art will be privately owned with no affiliation to the City of Co	lumbus and will be maintained by the applicant.	
List the City Department responsible for design, placeme NECLEATION AND PARKS	nt and maintenance of the installation, if applicable (Please specify).
City Department Contact LORI BAJDRO Name	LSBAUDRO@COLUMBUS.GOV Email	614-645-6986 Phone
Applicant Contact Information		
Name THE NEIGHBORHOOD DESI	ON CENTER	
Address 1902 N. HIGH ST. Colum	BUS, OH	
Phone 614.221.5001	Fax 614.221.5614	
Email ISABELA GOTHENEI GHBORUCOT) DE	ESIGN CENTER. Website THE NGIGHBORHOOT)	DESIGNCENTER ORG
Applicant Signature Applicant Signature	Supporting City Department Sign	gnature (If applicable)



1-28-08

Please include eight hard copies and one electronic version in PDF format (DVD/CD) of the check list materials, unless otherwise indicated.

\circ	Artist/organization project description, including how the project originated and who is involved.
0	Resume/Exhibition List and CD Rom or photos of Artist's previous work.
0	Proposed timeline for fabrication and installation (and removal date/plan if temporary).
0	Specific materials: specify dimension, weight, materials, color, texture and finish. Provide one full set of samples. If the work is a mural, specify type and brand of paint. Include maintenance considerations for all materials.
O	Artwork foundation/support attachment.
O	Site plan and contextual photo of site. Please note whether the site/building (if mural) is listed as historic, or is located in a historic district.
0	Elevation drawings showing the relationship of the work to the site.
0	Scale model of the work showing its relationship to the site, (if required by the Commission).
0	Budget and funding sources (committed and anticipated).
0	Include a strategy for maintenance, including a complete list of all maintenance requirements.
0	If the work is to be donated or placed on loan, provide a letter of support from the coordinating City Department.
0	Documentation of community process, including input and responses, from neighborhood organizations, such as city commissions, civic associations and societies, if applicable.
Ten	nporary Art Only
0	In addition to the items listed above, provide proof of liability insurance. If the insurance is being provided by another organization, please list the entity.
Art	ist Contact Information & NO CONCEPTUAL APPROVAL, JUST APPROVAL OF THE THREE FINALISTS.
Nam	19100000000000000000000000000000000000
Addı	ress
	ne Fax
Emai	ilWebsite
NOT in place	E: Columbus Art Commission Approval shall be required in addition to any other approval or permit that may be required by the City of Columbus prior to such ement or to allow continued placement. This includes, but is not limited to, the issuance or renewal of a Special Right-of-Way Permit pursuant to Chapter 910.
Pleas	se submit this form to:
	Baudro, AICP
	ram Coordinator
	nbus Planning Division V. Front Street, gr. fl.
	nbus, Ohio 43215
	4.645.6986
	4.645.1483
Isbau	dro@columbus.gov